

STATE OF NEW HAMPSHIRE 2010 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

PLEASE PRINT

I. Name of Lobbyist	(s) Fran Wend	elboa		NEW
II. Name of lobbyist	's partnership, firm or c	corporation, if any:		DEPARTMENT OF STATE
(Na	ame of partnership, firm or co	orporation)		
238 Lower	ox Bow Rd	New Hamps	ton NH	03256 (Zip Code)
Business Address: (S	Street)	(Town/City)	(State)	(Zip Code)
(603) 381 - 7 (Telephone)		(Fax)	e-mail ma+-	- wen france my fairpoint, net
reportable expense	covers: (Choose one – fil transactions which are n nsactions occurring in the	ot attributable to any o	ne client).	nay file a separate report for the following client:
		t appears on the Lobbyist R		
All reportable trai unrelated to any parti		including the lobbyist's	family), or the lobbying	ng firm listed below which are
IV. Date of Report Reports cover: act	April 28, 2010 ivity from date of registration	n to 3/31/10 activi	July 28, 2010 ity from 4/1/10 to 6/30/1	0
	October 27, 2010 A activity from 7/1/10 to 9/3		January 26, 2011 ity from 10/1/10 to 12/3	
	en no fees received and , complete just this form o			
	nai reports are attached			
	ived fees or made expendi			
☐ If you have paid Expense Reimbursen	an honorarium or reimbu	rsed expenses, you must	file Addendum B- R	eport of Honorariums or
		political contributions, y	you must file Ad de n d	lum C- Political Contributions
Sworn Statement/A I have read RSA 15, to the best of my kno Nan Wend (Signature of lobby)	wledge and belief.	and hereby swear or affir	blalin	information is true and complete
(Print Name of lobb	yist)			



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)	Tran Wendel	boc	
II. Name of lobbyist's par	tnership, firm or cor	poration, if any:	
	thership, firm or corporation) Sonal not () 1/3/ Ition that is reportable to form, indicate the fo	Cnt Jim Headd V Migglione Corpursuant to RSA Chap Blowing:	Date For Hows 50 House 165 oter 664 paid on behalf of the
Full name of candidate: Amount of contribution \$	Jim Headd (Last Name) (D) Check	(First Name) Office Candidate	(Middle Name/Initial) is Seeking <u>State</u> House
If the contribution is an in-ki actual cost of the in-kind con enter an estimated value and	nd contribution, provide tribution on the line above the word "estimate."	a description of the goove for amount of contrib	ds or services provided, and enter the nution. If the actual cost is not known, State House oor prize-
	45 Cash	won from d	our prize
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate i	s Seeking
	tribution on the line abov		ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate: _	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	•		s Seeking

(turn over to continue \rightarrow)

If the contribution is an in-kind contribution, provide a description actual cost of the in-kind contribution on the line above for amount enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contribution	s on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swistrue and complete to the best of my knowledge and belief.	ear or affirm that the foregoing information
Francine Werdelhoe	10/25/19
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	



STATE OF NEW HAMPSHIRE

Lohhyists Fees and Expenses
Addendum A

(RSA Chapter 15:6)

III. Name of Client Towar House (Dinving) II. Name of lobbyist's partnership, firm or corporation, If any: I. Name of Lobbyist(s) (Name of partnership, firm or corporation) Francine Wendedbox

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IV. Fees Received

reduced by any expenses: including research, monitoring legislation, and related legal work. The gross fee amount reported shall not be to lobbying, including fees for services such as public advocacy, government relations, or public relations services Indicate the gross amount of all fees received from the client identified above that are related, directly or indirectly,

- a) Total of all fees received in this reporting period
- b) Total of all fees received this calendar year, prior to this reporting period b) \$ 6,000 (This should equal the total of all prior monthly reports for this calendar year)
- c) Total of all fees received to date (Add lines a and b)

)s 9,000

 Indicate the amount of any such fees that are due, but have not yet been paid

9 \$

V. Expenses:

any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a (c) an itermized statement of each individual expenditure made during this reporting period of greater than \$25.00 for being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business during the reporting period for salaries, benefits, support staff, and office expenses, (b) the aggregate total of all Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by

d) Total expenses for this reporting period	ds 3,000
e) Total of expenses paid this calendar year, prior to this reporting period	6,8
(This should be the amount on line f of addendum A for last month's report)	
f) Total of all expenses year to date	10s / 600 /
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.	obying fees during this reporting
Paid to:	Amount:
	49
	S
	S
	S
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.	that the foregoing information
Jan () July	10/25/17
(Signature of lobby ist)	(Date)

(Print Name of lobbyist)